H. R. 1381

To amend title XVIII of the Social Security Act to provide incentives linking quality to payment for skilled nursing facilities and to establish a Long-Term Care Financing Commission.

IN THE HOUSE OF REPRESENTATIVES

March 17, 2005

Mr. English of Pennsylvania (for himself, Mr. Tanner, and Mrs. Wilson of New Mexico) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend title XVIII of the Social Security Act to provide incentives linking quality to payment for skilled nursing facilities and to establish a Long-Term Care Financing Commission.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,
- 3 SECTION 1. SHORT TITLE.
- 4 This Act may be cited as the "Medicare Nursing Fa-
- 5 cility Pay-for-Performance Act of 2005".

1	SEC. 2. ADDITIONAL MEDICARE PAYMENT FOR FACILITIES
2	THAT REPORT ADDITIONAL QUALITY DATA.
3	(a) Voluntary Reporting of Quality Measures
4	AND ADJUSTMENT IN PAYMENT.—
5	(1) IN GENERAL.—Section 1888 of the Social
6	Security Act (42 U.S.C. 1395yy) is amended by add-
7	ing at the end the following new subsection:
8	"(f) Voluntary Reporting of Quality Meas-
9	URES; CHANGE IN PAYMENT BASED ON REPORTED
10	QUALITY MEASURES.—
11	"(1) Establishment of additional quality
12	MEASURES.—
13	"(A) In General.—Not later than 6
14	months after the date of the enactment of this
15	subsection, the Secretary, through a contract
16	with a qualified independent party (such as the
17	National Quality Forum) identified by the Sec-
18	retary, shall provide for the identification of—
19	"(i) at least 10, and not more than
20	15, quality measures for the performance
21	of skilled nursing facilities under this title;
22	and
23	"(ii) the data to be reported, including
24	their collection and formatting, on a cal-
25	endar quarter basis for each such quality

1 measure to measure the performance of a 2 skilled nursing facility.

Such measures may be outcome or process measures. Such measures shall be in addition to the 14 enhanced measures published by the Secretary for such facilities for use as of September 1, 2005.

- "(B) MEASURE OF STAFFING LEVEL.—
 The quality measures identified under subparagraph (A) shall include a measure of the level of facility staffing and the mix of licensed staff at a facility.
- "(C) RISK ADJUSTMENT.—The values obtained for quality measures identified under subparagraph (A), including the existing 14 enhanced measures, shall be appropriately risk adjusted as applied to individual skilled nursing facilities in order to increase the likelihood that any differences in such values reflect differences in the care provided by the skilled nursing facilities and not differences in the characteristics of the residents in such facilities. Such risk adjustment shall take into account resident characteristics that are related to triggering a value for a quality measure but are not reflective of

1	facility care processes. Risk adjustment ap-
2	proaches may include, as appropriate—
3	"(i) excluding certain types of resi-
4	dents;
5	"(ii) stratifying residents into high-
6	risk and low-risk groups;
7	"(iii) statistical adjustment (such as
8	regression analysis) that takes into consid-
9	eration multiple characteristics (covariates)
10	for each resident simultaneously and ad-
11	justs the nursing facilities' quality measure
12	values for different resident characteristics;
13	or
14	"(iv) payer mix.
15	"(D) Low-utilization facilities.—
16	"(i) In general.—In selecting and
17	applying quality measures, there shall be
18	taken into account the circumstances of
19	low-utilization skilled nursing facilities.
20	"(ii) Definition.—For purposes of
21	clause (i) and paragraph (2)(B), the term
22	'low-utilization skilled nursing facility'
23	means a skilled nursing facility which had,
24	in most recent preceding cost reporting pe-
25	riod, fewer than 1,500 patient days with

1	respect to which payments were made
2	under this title.
3	"(E) Annual Evaluation.—The Sec-
4	retary shall provide for an annual process
5	whereby the use of particular quality measures
6	are evaluated and, as appropriate, adjusted in
7	consultation with a qualified independent orga-
8	nization
9	"(F) Posting on Website.—The Sec-
10	retary shall provide for the posting on its
11	website, and the publication at least annually,
12	of the quality performance of skilled nursing fa-
13	cilities as measured through values reported
14	under this subsection by such facilities.
15	"(2) Adjustment in payment based on
16	QUALITY PERFORMANCE.—
17	"(A) In general.—For each fiscal year
18	beginning with fiscal year 2007, in the case of
19	a skilled nursing facility that reports data
20	under paragraph (1) for the data reporting pe-
21	riod with respect to that fiscal year (as defined
22	in subparagraph (C)), the aggregate amount of
23	payment under this subsection shall be adjusted

as follows:

24

"(i) Increase of 2 percent for facilities in the case of a facility that, based on such data, has a composite score for quality that is equal to or exceeds such score for the baseline period (as defined in subparagraph (D)) for the top 10 percent of skilled nursing facilities that have reported such data for such baseline period, such aggregate payment shall be increased by such amount as reflects an increase in the market basket percentage increase applied for the fiscal year involved under subsection (e)(4)(E)(ii)(V) by 2 percentage points.

"(ii) Increase of 1 percent for Facilities in Next 10 percent in Quality.—In the case of a facility that is not described in clause (i) and that, based on such data, has a composite score for quality that is equal to or exceeds such score for the baseline period (as defined in subparagraph (D)) for the top 20 percent of such skilled nursing facilities that have reported such data for such baseline period,

such aggregate payment shall be increased by such amount as reflects an increase in the market basket percentage increase applied for the fiscal year involved under subsection (e)(4)(E)(ii)(V) by 1 percentage point.

"(iii) QUALITY THRESHOLD COVERING 80 PERCENT OF FACILITIES.—For the baseline period (as defined in subparagraph (D)), the Secretary shall establish a quality threshold score that covers 80 percent of the skilled nursing facilities that have reported such data for such baseline period.

"(iv) Decrease of 1 percent for Facilities below quality threshold.—In the case of a fiscal year beginning with fiscal year 2007, in the case of a facility that, based on such data, has a composite score on quality measures that is below the quality threshold score established under clause (iii) for the baseline period, the aggregate payment for the fiscal year involved shall be decreased by such amount as reflects a decrease in the mar-

1	ket basket percentage increase applied
2	under subsection $(e)(4)(E)(ii)(V)$ by 1 per-
3	centage point.
4	"(v) Year by year determina-
5	TION.—Any increase or decrease in pay-
6	ments to a skilled nursing facility under
7	the preceding provisions of this subpara-
8	graph for a fiscal year shall not affect or
9	apply to payments to such facility in any
10	subsequent fiscal year.
11	"(B) Treatment of Low-utilization
12	FACILITIES.—In the case of a low-utilization
13	skilled nursing facility that is unable to submit
14	data on one or more quality measures—
15	"(i) the facility shall not be penalized
16	under this paragraph due to its non-report-
17	ing of such data; and
18	"(ii) the composite rank or score shall
19	be based on the data so reported, with ap-
20	propriate adjustments so as to be com-
21	parable to other facilities.
22	"(C) Data reporting period.—For pur-
23	poses of subparagraph (A), the term 'data re-
24	porting period' means, with respect to—

1	"(i) fiscal year 2007, such period of
2	calendar quarters in fiscal year 2006 as
3	the Secretary shall specify, which, to the
4	extent feasible, shall be a period of at least
5	2 calendar quarters; or
6	"(ii) a subsequent fiscal year, the pe-
7	riod of 4 consecutive calendar quarters
8	ending on the June 30 preceding the fiscal
9	year.
10	"(D) Baseline Period.—For purposes of
11	subparagraph (A), the term 'baseline period'
12	means, with respect to—
13	"(i) fiscal year 2007, the period of
14	calendar quarters specified under subpara-
15	graph (C)(i); or
16	"(ii) a subsequent fiscal year, the pe-
17	riod of 4-calendar-quarters ending on June
18	30, 2007.".
19	(2) Limiting market basket increases to
20	FACILITIES THAT VOLUNTARILY REPORT INFORMA-
21	TION.—Subsection (e)(4)(E)(ii) of such section is
22	amended—
23	(A) in subclause (III), by striking "and" at
24	the end:

1	(B) in subclause (IV), by inserting "before
2	the first fiscal year in which the reporting of
3	quality measures is in effect under subsection
4	(f)(1)" after "each subsequent fiscal year" and
5	by striking the period at the end and inserting
6	"; and"; and
7	(C) by adding at the end the following new
8	subclause:
9	"(V) for each subsequent year,
10	the rate computed for the previous fis-
11	cal year increased, in the case of a
12	skilled nursing facility that reports
13	data under subsection $(f)(1)$ for the
14	fiscal year, by the skilled nursing fa-
15	cility market basket percentage for
16	the fiscal year involved.".
17	(b) Using Fiscal Year 2005 Payment Rates as
18	A FLOOR FOR SUBSEQUENT UPDATES.—
19	(1) In general.—Subsection (e)(4)(E)(ii)(IV)
20	and subsection $(e)(4)(E)(ii)(V)$, as added by sub-
21	section (a)(2), of such section is amended by insert-
22	ing "(taking into account, with respect to a previous
23	fiscal year that was fiscal year 2005, all add-ons to
24	such rate that were applicable in such fiscal year as
25	well as market basket adjustments made in subse-

1	quent fiscal years)" after "the rate computed for the
2	previous fiscal year".
3	(2) Effective date.—The amendment made
4	by paragraph (1) shall apply to the computation of
5	rates for fiscal years beginning with fiscal year
6	2006.
7	SEC. 3. LONG-TERM CARE FINANCING COMMISSION.
8	(a) Establishment.—There is hereby established a
9	commission to be known as the "Long-Term Care Financ-
10	ing Commission" (in this section referred to as the "Com-
11	mission").
12	(b) Composition.—The Commission shall be com-
13	posed of 10 members appointed by the Secretary of Health
14	and Human Services.
15	(c) Duties.—
16	(1) Analyses.—The Commission shall conduct
17	analyses of the financing of long-term care, includ-
18	ing the financing of nursing facilities. Such analyses
19	shall include an analysis of each of the following:
20	(A) The adequacy of Medicaid program fi-
21	nancing of the long term care system.
22	(B) Medicare's cross-subsidization of long-
23	term care for Medicaid patients.
24	(C) Total industry margins in long-term
25	care.

1	(D) Long-term demographic challenges.
2	(E) The impact of current trends, includ-
3	ing staffing shortages and litigation costs, on
4	long-term care spending.
5	(F) Different approaches to refinements in
6	the per diem RUG payment amounts and re-
7	lated payment methodologies under section
8	1888(e) of the Social Security Act (42 U.S.C.
9	1395yy(e)).
10	(2) Report.—The Commission shall submit to
11	Congress an annual report on its analyses. Each
12	such report shall include recommendations for such
13	changes in financing of long-term care as the Com-
14	mission deems appropriate.
15	(d) Terms, Compensation, Chairman, Meetings,
16	STAFF, AND POWERS.—The provisions of subsections
17	(c)(3), (c)(4), (c)(5), (c)(6), (d), and (e) of section 1805
18	of the Social Security Act (42 U.S.C. 1395b-6) (relating
19	to provisions for the Medicare Payment Advisory Commis-
20	sion) shall apply to the Commission in the same manner
21	as they apply to the Medicare Payment Advisory Commis-
22	sion.